



A Citizen Voice for the  
Aging Experience

**October 2019**  
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# ENGAGING NH NEWS

## GUEST EDITORIAL

### From Open Space to Universal Design

*Southern NH Planning Commission (SNHPC) Helps Chester Takes Steps to Diversify its Housing*

by Sylvia von Aulock

Along with transportation, housing is one of the top concerns for older residents looking to downsize, and for younger residents looking to start a new life in the greater Manchester region and New Hampshire in general. Housing today is a "seller's market" – home prices are becoming less and less affordable to many New Hampshire residents. Through our Becoming Age-Friendly Program, Southern NH Planning Commission (SNHPC) has put a focus on discussing, analyzing, and helping to address the housing needs of our region.

In 2017, SNHPC started their Age-Friendly Pilot Program, which aimed to work with communities on specific goals and projects related to age-friendly planning. Community champions from the rural town of Chester had shared their frustration with SNHPC early on; why was so much of new construction "McMansion" style

***Age-friendly neighborhoods are envisioned to consist of smaller, affordable, low-maintenance homes for ALL people***

housing? New housing wasn't affordable or desirable for seniors wanting to downsize or for their adult children to buy first homes. Taking advantage of SNHPC's Program, the Town's goal was to better understand what the community wanted, why there was a lack of diverse housing being built, and to create innovative regulations to allow for age-friendly housing.

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## WHO ARE WE?

*EngAGING NH is an all-volunteer not-for-profit organization registered with the State of NH. We work to support and promote activities, policies, planning and values that respect and include ALL older adults.*

Over the course of two years, SNHPC staff conducted surveys, community forums, and public meetings with town staff, planning board representatives, local developers, Chester residents, and a local senior citizen group. Ultimately, through the hard work of Chester’s Planning Coordinator and Planning Board, the town officially passed the Age-Friendly Subdivision in May 2019.

The intent of the new regulations is to keep the units smaller and more affordable, and the units must be universally designed (designed for people with any ability or disability). Additionally, the subdivision suggests shared facilities to keep costs and physical burden of owning a home to a minimum. Some of the specific requirements include: increasing density, regulating maximum square footage, and ensuring first-floor master bedrooms.

The efforts made in Chester were designed to keep the character of the town while providing tools for the town to incentivize more affordable and accessible homes. It should be noted, Chester homes are typically built on well and septic systems, thereby creating some limitations for density. This same subdivision might not work in every town, however, through meaningful outreach and visioning, allowances to create diversity in housing can be accomplished in rural and suburban New Hampshire.

Looking Ahead: Are you interested in talking about age-friendly housing? Interested in sharing your experiences and vision for housing in New Hampshire? Whether you’re a developer, planner, age-friendly advocate, banker, real estate guru, or just trying to find the perfect home, please join the staff of SNHPC and add to the live-

ly discussion on November 21st, at the NH Institute of Politics at St. Anslem College in Manchester. From 5:00 to 7:00 we will hear from all sides of this challenge, the different perspectives on examining the issues and how to solve housing diversity in NH. Thanks to our sponsors AARP New Hampshire and support from Tufts Health Plan Foundation.

For any questions about these topics, please contact: Sylvia von Aulock, Executive Director [svonalock@snhpc.org](mailto:svonalock@snhpc.org) and Cam Prolman, Regional Planner [cprolman@snhpc.org](mailto:cprolman@snhpc.org)

Sylvia von Aulock is Executive Director of Southern NH Planning Commission.

### NH Updates

#### **NH HAS A COMMISSION ON AGING!**

The new NH Commission on Aging held an organizational meeting on 9/16/19 and elected Rep. Polly Champion, sponsor of the Bill that created the Commission as Chair, Ken Berlin former State Committee on Aging (SCOA) Chair as Vice Chair and Roberta Berner formerly of Grafton County Senior Services as clerk.

The first order of business is to hire a director and two subcommittees were formed to address the administrative task to expedite that hiring. The 26 member Commission is composed of individuals with diverse backgrounds all of which relate to issues of our evolving needs, personal and public.

NH does not have an Agency on Aging; the Bureau of Elderly and Adult Services is limited in authority by the federal funding programs the Department of Health and Human Services administers. The Commission has much broader authority to address the needs of NH Citizens in a holistic and integrated approach.

This first, meeting was an opportunity for the members present to speak of their visions for the Commission. As they went around the room there were common themes:

- action, not just talk;
- sharing of ideas;
- coordination and coherence to replace fragmentation, and
- building on the great projects that are in place.

### **How to Contact Your NH Commission on Aging**

**Chair, Rep. Polly Campion**

polly.campion@leg.state.nh.us

**Vice Chair, Ken Berlin**

kaberline@comcast.net

**Clerk, Roberta Berner**

bernerabel@aol.com

The Commission will meet monthly on the 3<sup>rd</sup> Monday of the month at 10 AM in Room 205 of the Legislative Office Building in Concord and meetings are open to the public.

You may have noticed that the list of members to the State Committee on Aging (SCOA) has been replaced by Commission information. The members of SCOA are now members of the Commission. Some of the duties of SCOA, such as monitoring the State Plan on Aging, will be reassigned to the Commission.

EngAGING NH will include minutes and updates in the newsletter and we encourage your participation in this exciting new approach to planning and enacting new projects across a broad range of areas affecting our communities and our lives.

### **WHITE BIRCH SENIOR CENTER**

White Birch volunteers are assisting research being conducted by Tuff's University in a study on Sarcopenia, a degenerate loss of muscle mass and strength that occurs as people age. White Birch Director Marc McMurphy says, "Being kind

and being helpful is an expectation we place on ourselves. It can lead to good things for our community and the world. Kindness is simple to practice and, when offered from a genuinely humble soul, is refreshing."

### **VETERANS HOME AWARD**

The NH Veterans Home has received the top award in a statewide competition to demonstrate the positive therapeutic benefits of a personalized music program on those suffering from advanced dementia. The competition, called the Power of One, to signify just how one resident could help an entire health-care facility was sponsored by the NH Memories Steering Committee under a grant obtained by the NH Health Care Association to promote Music& Memory a program that rains nursing home staff to create per-

sonalized music playlists delivered on iPods,MP3 players and other digital devices for those in their care.

**HOME ENERGY AUDITS**

Looking to make your home more energy efficient and more comfortable? The Home Heating Index Tool is an easy online way to determine if your home qualifies for an audit that can ultimately help you earn efficiency incentives and rebates as part of the NH SAVES Audit and Weatherization Program. To use the tool go to:

nhsaves.com/programs/energy-audits-weatherization/

**AD ON TV**

We've heard from many folks who have received surprise medical bills even though they have health insurance, which can cause folks to have to go into

debt to pay egregious costs. Sen. Shaheen is working in a bipartisan fashion to end surprise medical billing. She's introduced legislation, Reducing Costs for Out-of-Network Services Act, to establish caps on provider charges for out-of-network care, while allowing State governments to have flexibility to determine how much out-of-network providers should be able to charge in these surprise billing situations. She has also supported Sen. Hassan's No More Surprise Medical Bills Act, which would create an arbitration process for out-of-network providers and insurers to resolve the amount providers should get paid for out-of-network services in these situations. Senator Shaheen is dedicated to reducing healthcare costs and making sure quality care is widely accessible.

Special interest groups who benefit from surprise medical billing are using scare tactics to distort the Senator's record which is what the ads are at-

tempting to display.

*Office of Senator Jeanne Shaheen*

**SENATORS RAISE RED FLAG ON LATEST SCAM TARGETING SENIORS**

Sen. Maggie Hassan of New Hampshire has joined two other senators in calling on Attorney General William Barr and Health and Human Services Secretary Alex Azar to protect seniors from a scam targeting Medicare recipients.

Criminals are reportedly targeting seniors by offering genetic testing they claim is covered by Medicare, wrote Hassan, D-N.H., and Sens. Bill Cassidy, R-La., and Sheldon Whitehouse, D-R.I.

"...scammers are deceiving Medicare beneficiaries and inducing them to receive genetic test screenings covered by Medicare Part B. This results in potentially compromised personal health information and the American taxpayer paying for unnecessary tests ranging in average price from \$6,000 to \$9,000, and up to \$25,000,' the senators wrote in the letter.

4. If the fraudulent ordering and billing is not usually detected until the post-claims audit process, does the Department believe it

**WHO IS MY LEGISLATOR?**

Use this quick link to find and contact your local State Rep and Senator:

<http://www.gencourt.state.nh.us/house/members/wml.aspx>

Visit your town or city's website to find contact information for your local elected officials.

**Tell them your ideas, thoughts & concerns!**

should consider specific coverage or payment policies such as pre-claim review or other tools? If such a policy is deemed too broad, would the Department consider a genetic testing ordering utilization management demonstration in states where fraudulent billing rates are the highest for genetic tests... ?" ' 5. Laboratories and genetic test manufacturers have a clear financial incentive to increase testing uptake and volumes among the Medicare population.

Is HHS OIG investigating the potential for laboratories and manufacturers to create collaborative arrangements to target attending physicians with high Medicare patient volumes to order tests that are not medically necessary ... ?

6. The Department of Justice and HHS OIG serve the role of providing criminal enforcement of the Anti-Kickback Statute (AKS) and program integrity oversight through tools such as Health Care Fraud Prevention Partnership and the Medicare Fraud Strike Force.

What types of coordination and strategies are DOI and HHS deploying to leverage

interagency fraud detection, prevention, and enforcement capabilities?

7. What action is the Administration for Community Living considering or taking in using social media to combat spurious claims for genetic testing

8. What safeguards are on social media? HHS and relevant/agencies are developing to address this type of predatory fraudulent behavior in the future?

*Union Leader, 8/19/19*

**SCAM WARNING**

The Administration for Community Living, which is warning seniors about these scams, has been working with the Centers for Medicare and Medicaid Services as well as the Center for Program Integrity. In their letter, the senators asked for a response to the following questions:

1. Is the Department of Health and Human Services (HHS) aware of ongoing fraudulent schemes targeting Medicare seniors and defrauding taxpayers?
2. Understanding that under the Medicare statute and regulations a genetic test would not be covered by Medicare unless ordered by the beneficiary's treating or attending physician and deemed medically rea-

sonable and necessary, how are fraudsters soliciting seniors and circumventing this requirement?

3. What is the process CMS utilizes to confirm that a genetic test was ordered by the appropriate physician for a medically reasonable and necessary purpose?

**Your Voice**

**POISON IVY**

I saw this on a video and thought it was great info. The reason we get a rash from poison ivy is because the oil stays on our skin. The recommendations for ensuring that you remove all the oil is wash 3 times and use a washcloth. The abrasive action helps.

Thanks EngAGING. Your newsletter is always packed with good information.

**FIRE PREVENTION TIP**

House fires have been caused by a buildup of lint in the dryer. Small brushes might just push the lint further into the trap and pack it down. The best bet is to use a vacuum and a simple tip is to tape a cardboard tube from toilet paper to the vacuum hose and squeeze the ends together to fit into the lint trap.

**MENTAL HEALTH AND SUICIDE PREVENTION**

National Alliance on Mental Health (NAMI) announces NAMIWalks NH October 6, 2019 in Concord. Contact walks@NAMINH.org for more information.

**GRANDPARENT GUIDE**

Waypoint NH has put out a comprehensive guide for grandparents caring for grandchildren. You can find the guide at [www.waypointnh.org/programs/grandparenting-resource](http://www.waypointnh.org/programs/grandparenting-resource)

**Focus on Community**

**OAKS**

Organized Acts of Kindness for Seniors=OAKS was started three years ago with extensive research including the Village to Village Network, an international organization, networking through email with questions and answers. Each Village is organized by volunteers to create sustainability in their own local way with the help, if they continue to belong, members being aided by 18 volunteers. Each day is miraculous as we serve and noted, we are getting new members and volunteers daily.

We acquired our 501c3. One year ago last month and have grown to 25

We have a working Board of Directors doing, Finance, Member and Volunteer training, Marketing, Planning events, and Office management. Our volunteers give weekly services to our members and each member has a different request as to needs and the volunteers become very caring for their individuals.

We service Franconia, Easton, Sugar Hill, Bethlehem, Littleton, and Whitefield. NH. We are membership and grant and donor funded and continue growing, gaining sustainability. Oaks is always open for new volunteers and members. Contact: Kay Kerr, OAKS 262 cottage St Suite 107 Littleton , NH 03261; [oaks4info@gmail.com](mailto:oaks4info@gmail.com); 603 575 5502.

**GOVERNMENT SPONSORED DISCO**

South Korea’s population is currently aging faster than any other developed nation in the world. According to a 2016 census, roughly 14 percent of the country’s population was made up of citizens over the age of 65, amounting to 6.8 million people. And, as there’s increasing evi-

dence about the health risks of loneliness, especially among the elderly, the South Korean government has come up with a creative solution to keep its old folk away from such afflictions — the disco! A daytime discotheque for over-65s in the Korean capital Seoul is giving its seniors a new lease of life. The dance parties in Seoul are the first events of their kind to be funded by the government in order to combat senior loneliness, isolation, and dementia in the rapidly ageing country. Some seniors call it a playground, others say it is their medicine – or even better than medicine.

[www.goodnewsnetwork.org/south-korean-seniors-heal-in-daytime-disco/](http://www.goodnewsnetwork.org/south-korean-seniors-heal-in-daytime-disco/)

**AMERICA FAILS TO FEED ITS AGING**

Millions of seniors across the country quietly go hungry as the safety net designed to catch them frays. Nearly 8% of Americans 60 and older were “food insecure” in 2017, according to a recent study released by the anti-hunger group Feeding America. That’s 5.5 million seniors who don’t have consistent access to enough food for a healthy life, a number that has more than doubled

since 2001 and is only expected to grow as America grays.

The plight of hungry older Americans is shrouded by isolation and a generation's pride. The problem is most acute in parts of the South and Southwest. Louisiana has the highest rate among states, with 12% of seniors facing food insecurity. Memphis fares worst among major metropolitan areas, with 17% of seniors like Milligan unsure of their next meal.

And government relief falls short. One of the main federal programs helping seniors is starved for money. The Older Americans Act — passed more than half a century ago as part of President Lyndon Johnson's Great Society reforms — was amended in 1972 to provide for home-delivered and group meals, along with other services, for anyone 60 or older. But its funding has lagged far behind senior population growth, as well as economic inflation.

The biggest chunk of the act's budget, nutrition services, dropped by 8% over the past 18 years when adjusted for inflation, an AARP report found in February. Home-delivered and group meals have de-

creased by nearly 21 million since 2005. Only a fraction of those facing food insecurity get any meal services under the act; a U.S. Government Accountability Office report examining 2013 data found 83% got none.

With the act set to expire Sept. 30, Congress is now considering its reauthorization and how much to spend going forward.

Meanwhile, according to the U.S. Department of Agriculture, only 45% of eligible adults 60 and older have signed up for another source of federal aid: SNAP, the food stamp program for America's poorest. Those who don't are typically either unaware they could qualify, believe their benefits would be tiny or can no longer get to a grocery store to use them.

Even fewer seniors may have SNAP in the future. More than 13% of SNAP

households with elderly members would lose benefits under a recent Trump administration proposal. For now, millions of seniors — especially low-income ones — go without. Across the nation, waits are common to receive home-delivered meals from a crucial provider, Meals on Wheels, a network of 5,000 community-based programs.

Since malnutrition exacerbates diseases and prevents healing, seniors without steady, nutritious food can wind up in hospitals, which drives up Medicare and Medicaid costs, hitting taxpayers with an even bigger bill. Sometimes seniors relapse quickly after discharge — or worse.

*Laura Ungar and Trudy Lieberman, Kaiser Health News*

## **NEW COMMUNITY APPROACH TO DEPRESSION**

A GP practice in Manchester, England that is prescribing plants to help people with anxiety, depression, and loneliness. Patients are given plants to care for, which are later planted in the surgery's communal garden — a place that offers both the benefits of green space as well

Do you know an Elder leader making NH better for all of us as we age?

### **Nominated him or her for a Vaughan Award!**

Nomination forms are online at

[www.engagingnh.org/vaughan-awards.html](http://www.engagingnh.org/vaughan-awards.html)

as social connections. Supported by the city's health commissioners, the concept is a wonderfully holistic way to promote community involvement while improving wellbeing in the city.

[www.treehugger.com/lawn-garden/doctors-are-prescribing-houseplants-anxiety-and-depression.html](http://www.treehugger.com/lawn-garden/doctors-are-prescribing-houseplants-anxiety-and-depression.html)

**News You Can Use**

**8 GOOD THINGS THAT HAPPEN AS YOU AGE**

Forget wrinkles and gray hair. There are lots of reasons to celebrate each time you add a candle to your birthday cake. You gain wisdom and many other benefits with age. Here's a look at just a few of the good things that come with growing older.

*An ability to manage social conflicts*

So much of the drama of youth goes out the window with the wisdom of maturity. As we age, we're able to look at social situations and manage them a little more wisely.

Researchers at the University of Michigan put this to the test. For their study published in the journal PNAS, they asked 200 participants to read "Dear Ab-

by" letters and offer up their best advice.

People in their 60s were better than their younger counterparts at coming up with multiple outcomes for a social conflict and were better at imagining different points of view, while preferring solutions that involved compromise.

*An Encyclopedic Knowledge*

When you're young, you're learning new things all the time. You're memorizing math formulas and spelling words, learning historical events and scientific equations. Your brain is a sponge.

When you're older, you use what you know.

Psychologists often refer to two main types of intelligence: fluid and crystallized. Fluid intelligence is someone's ability to solve problems, learn new things and use logical thinking in unfamiliar situations.

With fluid intelligence, you don't use prior knowledge to help you figure things out. You might use fluid intelligence when solving a puzzle or doing something creative, like playing an instrument for the first time. Fluid intelligence typically peaks in young adulthood and then slowly declines.

Crystallized intelligence, however, is based on what you've learned in the past. It makes use of information and skills you've already mastered. You use it in situations like reading comprehension and vocabulary tests. Because you just keep collecting knowledge, crystallized intelligence just keeps increasing as you get older.

*A greater sense of well-being*

It's known as the paradox of aging: The older people get, often the happier they become.

In one study, researchers surveyed more than 1,500 San Diego residents between the ages of 21 and 99, and found that those in their 20s were the most stressed out and depressed, while those in their 90s were the most content.

"The consistency was really striking," Dilip Jeste, director of the UC San Diego Center for Healthy Aging and senior author of the study, told the Los Angeles Times. "People who were in older life were happier, more satisfied, less depressed, had less anxiety and less perceived stress than younger respondents."

Other studies have also looked at the link between aging and happiness. They've found that as we get older, we become more trusting, and people who trust others are more likely to be happier.

Older people often have increased financial well-being, so that takes the monetary element out of the stress equation. In addition, they tend to let go of negative emotions and focus on positive events.

*An immunity window*

Little kids get sick all the time. They pass colds around at school and catch everything because their growing immune systems are still developing. The good news is that as you age, your adult immune system recognizes these microbes as they invade your body and forms an "immune memory." But there's an ideal time frame, John Upham from the University of Queensland tells the BBC.

"It does begin to drop off in your 70s or 80s, but there's a bit of a sweet spot for people — particularly from your 40s through to your late 60s and early 70s — where the immune system remembers the viruses experienced over the years."

**We Want You to Know . . .**

EngAGING NH promotes citizen leadership and the active involvement of New Hampshire's older adults in the development of communities and public policies that support all individuals as we age. We are a COMPLETELY VOLUNTEER organization with no paid staff, and a limited budget.

We actively partner & work with other NH advocates.

Formal Partnerships

- NH State Independent Living Council
- Disabilities Rights Center—NH
- NH Cares
- UNH Center for Aging and Community Living
- Oral Health Care Expansion, Children's Alliance of NH
- Self Advocacy Leadership Team (SALT)
- Mid-State Regional Coordinating Council
- Southern New Hampshire Planning Commission

Active Collaborations & Groups:

- Elder Rights Coalition

Other Groups we work with:

- AARP
- NH Hospice and Palliative Care Organization
- NH State Commission Aging
- NAMI
- NH Alliance for Retired Americans
- DD Council
- UNH Institute on Disabilities
- NASW-NH
- NH Association of Senior Centers
- Endowment for Health, Alliance on Healthy Aging
- NH Legal Assistance
- Department of Health & Human Services
- ServiceLink

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During that time, you might be less likely to catch colds and get sick.

*Becoming more agreeable*

Forget about getting older and crankier. As you age, there's a good chance you'll become more agreeable and easier to get along with. In a study of more than 132,000 people ages 21 to 60, researchers at the University of California, Berkeley, looked at overall trends in personality traits. They found that participants started to become the most agreeable in their 30s and continued to improve throughout their 60s, according to the American Psychological Association. This even happened among men, which debunks the concept of "grumpy old men," said lead researcher and psychologist Sanjay Srivastava, Ph.D.

*Fewer migraines*

If you suffered from migraines most of your life, you may get a break as you get older. If hormones are one of a woman's headache triggers, migraines can sometimes abate after menopause, according to the American Headache Society. Only 10% of women and 5% of men over 70 still report

**HELP!**

Do you need help with your Social Security or VA benefits? Do you have questions about the IRS or Medicare? If so, your NH Congressional Delegation can help!

Your two U.S. Senators and two Congresswomen all have staff equipped to help New Hampshire residents with issues, concerns or questions related to the federal government. The contact information for the NH Congressional Delegation is below. Please don't hesitate to reach out!

Senator Jeanne Shaheen  
2 Wall Street, Suite 220  
Manchester, NH 03101  
603-647-7500  
[www.shaheen.senate.gov](http://www.shaheen.senate.gov)

Senator Maggie Hassan  
1589 Elm Street, 3<sup>rd</sup> Floor  
Manchester, NH 03101  
603-622-2204  
[www.hassan.senate.gov](http://www.hassan.senate.gov)

Rep. Chris Pappas  
1<sup>st</sup> Congressional District  
660 Central Ave., Unit 101  
Dover, NH 03820  
603-285-4300  
[www.shea-porter.house.gov](http://www.shea-porter.house.gov)

Rep. Annie Kuster  
2<sup>nd</sup> Congressional District  
18 North Main Street, 4th Floor  
Concord, NH 03301  
603-226-1002  
[www.kuster.house.gov](http://www.kuster.house.gov)

migraines, reports WebMD. And if you still have a migraine then, it may come without actually headache pain. As people get older, some may only experience migraines as visual or sensory disturbances without any pain.

*Less sweat*

Hot flashes aside, you may sweat less as you age. (Well, technically, you sweat differently.) With age, sweat glands shrink and there are fewer of them. A study in the Journal of Applied Physiology found that women in their 20s sweat more than women in their 50s and 60s. Researchers attributed the difference to either "a diminished response of the sweat glands to central and/or peripheral stimuli" or "an age-related structural alteration in the eccrine glands or surrounding skin cells."

*Change in self-esteem*

Long gone is the insecurity of youth. Self-esteem is highest right around age 60, research finds. In a paper published in Psychological Bulletin, researchers analyzed 191 journal articles and dissertations on self-esteem that involved nearly

**RAISE YOUR VOICE!**

Please let us know what's on your mind and what's important to you.  
engagingnh@gmail.com

165,000 people. They found that self-esteem starts to grow between ages 4 and 11, then levels off in the early teenage years of 11 to 15.

"On average, self-esteem increases in early and middle childhood, remains constant (but does not decline) in adolescence, increases strongly in young adulthood, continues to increase in middle adulthood, peaks between age 60 and 70 years, and then declines in old age, with a sharper drop in very old age," they concluded.

That self-confidence stays strong for about a decade, then drops around age 90, often because of health reasons. Less sweat, more self-esteem, fewer headaches and so much more? Sounds like a pretty good trade-off for a couple of laugh lines.

Mary Jo DiLonardo

[www.mnn.com/health/fitness-well-being/stories/good-things-about-getting-older](http://www.mnn.com/health/fitness-well-being/stories/good-things-about-getting-older)

**YOUR LOCAL RESOURCES**

ServiceLink Aging & Disability Resource Center 866-634-9412 (service-link.nh.gov); 211 NH is the connection for NH residents to the most up to date resources they need from specially trained Information and Referral Specialists. 211 NH is available 24 hours, 365 days a year. Multilingual assistance and TDD access is also available.

**NEW COMIC STRIP**

Life after 60 may not be all laughs. But it's proving to be fertile territory for the wit and insights of Andy Landorf and John Colquhoun, the funny creators of *The New 60*, a twice-a-week comic strip now in its second year.

The strip centers on four 60-something pals, who often gather at their local diner to share stories, commiserate and poke fun at each other. The diner's waitress, also in their age group, is a recurring character, as are an assortment of family members and innocent bystanders. Readers often see the strip kidding about marriages in midlife, technology, money, work, health, social media, Social Security, aging and the boomer generation's millennial kids.

[www.thenew60comic.com](http://www.thenew60comic.com)

**4 WAYS TO DETECT STROKES**

1. Ask the individual to SMILE.
2. Ask the person to TALK and SPEAK A SIMPLE SENTENCE (Coherently).
3. Ask him or her to RAISE BOTH ARMS.
4. Ask him or her to stick out your tongue! (it should be straight not crooked)

If he or she has trouble with ANY ONE of these tasks, call emergency number immediately and describe the symptoms to the dispatcher.

**PLASTIC RECYCLING GUIDE**

How often do you wonder about what can go in the recycling bin and what cannot? The answer varies from municipality to municipality, as each has its own facilities for recovering waste materials and not all are the same. There are, however, some general rules that stay the same. A new guide from NPR attempts to clarify these for the average consumer, describing different categories of materials and whether or not they are usually recyclable.

As you scroll through the guide, it explains why the item has a typical outcome and what you can do to improve it. For example, small plastics such as bread bag clips, pill packaging, and single-use condiment pouches can get caught or fall between the belts and gears of machinery, and so are not usually recyclable.

Flexible packaging, such as baby food purée and chip bags, is not recyclable because it contains layers of different types of plastic, often lined with aluminum:

"It's not possible to easily separate the layers and capture the desired resin."

Beverage bottles are the types of items a recycling facility was built to handle – "made from a kind of plastic that manufacturers can easily sell for making products such as carpet, fleece clothing or even more plastic bottles."

One of the most valuable points made by the guide is that recycling is a business – and that is something we'd do well to remember more often. Gaining a second life is not a guaranteed outcome for anything that goes into a blue box because it depends on a global market, on supply and demand, and whether

municipalities can actually process and sell the waste materials they've gathered.

"Recycling is a business with a product that is vulnerable to the ups and downs of commodities markets. Sometimes it's cheaper for packagers to make things out of raw, virgin plastic than it is to buy recycled plastic."

Recycling alone will not fix our global waste crisis. At

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[www.facebook.com/EngAGINGNH](http://www.facebook.com/EngAGINGNH)

this point it's barely making a dent, but it's still better than nothing. Learn how to do it better, buy products made from recycled materials, and encourage designers to make packaging easier to recycle or reuse.

As the guide concludes, "Recycling alone can't solve the waste conundrum, but many believe it's a vital piece of an overall strategy, which also includes re-

ducing packaging and replacing disposables with reusable materials."

[www.treehugger.com/plastic/npr-has-created-handy-guide-plastics-recycling.html](http://www.treehugger.com/plastic/npr-has-created-handy-guide-plastics-recycling.html)

### LEARN THE ART OF FALLING

Chances are, sadly, that sooner or later you, or someone you know, young or old, will fall. Avoidance is your best bet, but if you do fall, here are some hints to help, courtesy of AARP ([www.aarp.org](http://www.aarp.org)):

If you feel you are about to fall, keep your body relaxed as much as possible and not tense; bend your elbows and knees. If you lock your arms and legs and keep them rigid, these bones are more likely to break.

Always protect your head. Fold your chin into your chest so your head is less likely to hit the ground.

Try to land on the "meatiest" parts of your body -- your thighs and derriere, or your upper arms.

Keep rolling. This will diffuse energy and broaden the impact of the fall across your body.

One great hint to prevent a fall? Be in the moment. Focus on your movements,

with no distractions. --  
Heloise

## Health & Wellness

### WORDS MATTER

Psychologist Becca Levy, at the Yale School of Public Health, has also shown that something as simple as subliminal exposure to age-positive words *can lead to physical improvements in older people* of the sort that typically come about only after a program of regular exercise. If Levy and other scientists are correct, putting a more positive spin on our general view of aging might make a profound difference in the health of people over 65, the fastest-growing age group in America today.

It seems almost too good to be true to think that a simple shift in mind-set could make a serious dent in the \$702 billion spent annually on Medicare, 90 percent of which is for older people with multiple chronic diseases. But that's what some of the most surprising mind-body findings suggest: A more positive attitude toward aging leads to improvements in older people's memory, gait, balance, speed and a quality that Levy refers to as "will to live."

<https://www.sciencenews.org/article/positive-attitudes-about-aging-may-pay-better-health>

### HEARING AIDS AND DEMENTIA

While Medicare doesn't cover the cost of hearing aids, cheaper over-the-counter versions are coming next year. A study published by the Journal of the American Geriatrics Society found that people age 66 and older who got a hearing aid shortly after being diagnosed with hearing loss were less likely to receive a first-time diagnosis of dementia or depression, or be injured by a fall, in the following three years.

Researchers from the University of Michigan examined insurance data from nearly 115,000 Michigan residents whose insurance covered part of the cost of hearing aids. People who got hearing aids had an 18% lower risk of being diagnosed with dementia, including Alzheimer's disease, within three years of their hearing loss diagnosis, the study found. The risk of a depression diagnosis was 11% lower and the risk of being injured in a fall was 13% lower.

"Though hearing aids can't be said to prevent these conditions, a delay in the

onset of dementia, depression and anxiety, and the risk of serious falls, could be significant both for the patient and for the costs to the Medicare system," said Elham Mahmoudi, a University of Michigan health economist who led the study. It should be noted that less expensive models are expected on the market next year.

[www.marketwatch.com](http://www.marketwatch.com)

### THE TALK SENIORS NEED TO HAVE WITH DOCTORS BEFORE SURGERY

It's a common complaint: Surgeons don't help older adults and their families understand the impact of surgery in terms people can understand, even though older patients face a higher risk of complications after surgery. Nor do they routinely engage in "shared decision-making," which involves finding out what's most important to patients and discussing surgery's potential effect on their lives before setting a course for treatment.

Older patients, it turns out, often have different priorities than younger ones. More than longevity, in many cases, they value their ability to live independently and spend quality time with loved ones, according to Dr. Clifford

Ko, professor of surgery at UCLA's David Geffen School of Medicine.

Now new standards meant to improve surgical care for older adults have been endorsed by the American College of Surgeons. All older patients should have the opportunity to discuss their health goals and goals for the procedure, as well as their expectations for their recovery and their quality of life after surgery, according to the standards.

Surgeons should review their advance directives — instructions for the care they want in the event of a life-threatening medical crisis — or offer patients without these documents the chance to complete them. Surrogate decision-makers authorized to act on a patient's behalf should be named in the medical record.

If a stay in intensive care is expected after surgery, that should be made clear, along with the patient's instructions on interventions such as feeding tubes, dialysis, blood transfusions, cardiopulmonary resuscitation and mechanical ventilation.

This is far cry from how "informed consent" usually works. Generally, surgeons explain to an older patient

the physical problem, how surgery is meant to correct it and what complications are possible, backed by references to scientific studies.

Surgeons can help guide discussions that require complex decision-making by asking five questions, according to Dr. Zara Cooper, associate professor of surgery at Harvard Medical School:

How does your health affect your day-to-day life?

When you think about your health, what's most important to you?

What are you expecting to gain from this operation?

What health conditions or treatments worry you most?

And what abilities are so critical to you that you can't imagine living without them?

Instead of citing statistics on the risk of pneumonia or infection, for instance, a surgeon would explain what might happen if things went well or badly. Would the patient be in pain? Would she need nursing care? Would he be able to return home and do things he liked to do? Would she land in the ICU? Would he be able to walk on his own?

**FYI...**

This newsletter is intended as a forum for you to share personal experiences, information and points of view.

In our media driven world of skillful marketing and political spin, we believe that diversity is critical to discernment and therefore the Eng.-AGING NH Board of Directors welcomes all points of view, expressed with civility!

While the opinions expressed do not necessarily reflect those of the Board members, our intent is to include material that assists you in forming your own opinions.

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[engagingnh@gmail.com](mailto:engagingnh@gmail.com)

A similar range of possibilities is presented for a treatment alternative. Then the surgeon identifies the most likely outcomes for surgery and the alternative, based on the patient's circumstances.

Judith Graham, KHN.org

**BOOST YOUR IMMUNE SYSTEM NATURALLY**

Your immune system is much like the muscles in your body: you have to train it to do its job cor-

rectly. With that said, here are 12 key things immunologist Heater Monday says you should do to strengthen your immune system.

**1.** Take a probiotic that has a broad array of species.

*Lactobacil-*

*lus* and *Bifidobacterium* are two of the most important families of bacteria that populate our gut from birth, and they have been shown to positively affect our immune health. Remember, probiotics are full of live organisms, so it pays to spend a little more on a good-quality brand.

**2.** Avoid drugs and over-the-counter medications. Get this: it takes three to six months for our microbiome to recover from one week of antibiotic treatment, so best to avoid it.

**3.** To fend off sickness, take the following three vitamins and minerals each day: zinc (15-30mg), vitamin D (2,000 IU), and vitamin C powder (1,500mg).

**4.** Try colostrum—the “first milk” from nursing mammals, which is rich in protective antibodies.

**5.** Incorporate bone broth into your diet. The natural gelatin, collagen, and amino acids in them tend to the gut, improve wound healing, and help support

the health of individual immune cells such as lymphocytes.

**6.** Make fungi a part of your diet. Reishi, Shiitake, and Maitake have all been found to boost the immune system.

**7.** Harness the power of the sun. Vitamin D deficiency is associated with increased frequency of infection, so get some natural vitamin D from the sun.

**8.** Sweat it out in a sauna. A regular visit to the sauna not only improves the health of our protective white blood cells but also makes it harder for bacteria and viruses to survive through the increase of body temperature.

**9.** Use natural antimicrobials to ward off infection. By eating superfoods like raw garlic and Manuka honey, you strengthen your immunity.

**10.** Exercise!. With regular exercise, you improve your antibody response to infections.

**11.** Take to your bed. Chronic sleep deprivation and disruption of the sleep-wake cycle cause an activation of the inflammatory immune response. Get your rest and avoid this.

**12.** Manage your stress: Chronic stress suppresses

our immune response which is why it’s vital to find ways to de-stress is vital. Meditation is a good place to start with this.

[www.mindbodygreen.com/articles/all-natural-ways-to-boost-your-immune-system](http://www.mindbodygreen.com/articles/all-natural-ways-to-boost-your-immune-system)

## DEMENTIA RISKS FROM DRUGS

*New Study Adds to Concern About Certain Drugs and Dementia Risk. Experts recommend discussing the use of anticholinergics with your doctor.*

As people get older, they’re more likely to need medications on a regular basis to manage one or more

### Can You Help?

You may make a donation to ENH through our fiscal agent, Disabilities Rights Center-NH, Inc. which is a non-profit 501 (c) (3) corporation.

Make your check out to Disabilities Rights Center-NH, Inc. and note “EngAGING NH” on the memo line. DRC’s mailing address is 64 North Main Street, Suite 2, 3rd Floor, Concord, NH 03301-4913.

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**HELP SPREAD THE WORD!**

If you like this newsletter, please share it with your family, neighbors, friends and colleagues.

chronic conditions. Some of these medications fall into a class known as anticholinergics and may not be ideal to take for long periods because they could increase the risk of dementia. Previous research has shown an association between the use of anticholinergic medications — antidepressants, antipsychotics, bladder medications and drugs to treat Parkinson’s disease and epilepsy — and increased dementia risk for older adults.

The latest study, from researchers at the University of Nottingham and published in the JAMA Internal Medicine June 2019 issue, showed an even higher risk associated with the long-term use of certain anticholinergic drugs among people 55 and older.

“We found that people with a total anticholinergic exposure of more than one thousand and ninety five daily doses within a ten-year period before diagnosis, not counting the year before diagnosis, had a for-

ty nine percent increased risk, compared to people who did not take these anticholinergic medications,” says study author Carol Coupland, professor of medical statistics in primary care at the University of Nottingham’s School of Medicine. “This is equivalent to three years’ daily use of a single strong anticholinergic medication or one year’s daily use of three strong anticholinergic drugs.

It’s important that patients taking these medications don’t just stop them abruptly without consulting their doctor, as this could be harmful.”

The new study from the University of Nottingham was observational, as was previous research, which means it doesn’t prove or disprove that anticholinergics cause dementia. For example, it’s possible that people who are at increased risk of dementia also are at increased risk of other conditions for which they took the medication.

More research is needed to determine whether the drugs actually cause dementia. But the association with the increased risk is concerning. Up to 27% of older adults take anticholinergics, which are pre-

scribed to treat a variety of conditions, from depression to urinary incontinence to chronic obstructive pulmonary disorder (COPD).

Discuss Alternatives With Your Doctor.

<https://www.nextavenue.org/anticholinergic-drugs-dementia-risk>

*Lisa Fields*

**SCIENCE TELLS US LAUGHTER CAN HELP US LEAD A HEALTHIER LIFE**

In 1976, Norman Cousins, the revered editor of the Saturday Review, wrote a piece that signaled the arrival of laughter in the precincts of science. The piece, which was called “Anatomy of an Illness (as Perceived by the Patient)”, follows Cousins as he checks himself out of a hospital and into a hotel after the best conventional care failed to improve his ankylosing spondylitis—a crippling autoimmune spinal arthritis.

Once inside his hotel room, he took megadoses of anti-inflammatory vitamin C and watched long hours of Marx Brothers movies and TV sitcoms. He laughed and kept on laughing. He noticed that, as he did, his pain diminished. He felt stronger and better. As good an observer as any of

his first-rate doctors, he developed his own dose-response curve: ten minutes of belly laughter gave him two hours of pain-free sleep. Soon enough, he became more mobile.

The point here is not to say that laughter is a cure-all for medical conditions. But what it does tell us is that by making laughter a part of our everyday life, we can better cope with worries, stressors, and self-condemning thinking patterns that can wreak havoc on our health.

<https://thriveglobal.com/stories/laughter-benefits-health-well-being-healing-trauma/>

### Tech Tips

#### TECH SUPPORT SCAM

“This is AppleCare. Your account may have been compromised”, followed by a request to purchase Google Play cards (Google Play is the app store for Android phones).

This “tech support” scheme was the second most common phone scam in the first half of 2019, following Social Security fraud. And according to the Federal Trade Commission (FTC), personal losses related to gift card purchases totaled

\$53 million through September 2018. That’s up from \$20 million for the entire year of 2015. And it represents only those cases that have been reported.

In a time when online platforms hold so much of our vital and personal information, scamming can be a scary prospect. Abagnale says using a few simple protections can make a world of difference. For example, password authentication and replacing passwords frequently is a critical step to avoid hacking. When it comes to phone-based scams, he recommends being apprehensive of callers asking for information such as account numbers, social security number, or those claiming to have information about relatives. If something sounds suspicious, it probably is.

[www.vox.com/the-goods/2019/8/29/20836745/frank-abagnale-scam-me-if-you-can](http://www.vox.com/the-goods/2019/8/29/20836745/frank-abagnale-scam-me-if-you-can)

#### 3D PRINTER CREATES MINI HEART

Since there aren’t nearly enough human hearts available for transplant for patients that need them, scientists have been searching for ways to create an artificial heart that is viable for transplant.

This week, science took a big step towards making this reality after Chicago-based biotech company BIOLIFE4D announced it has successfully 3D-bioprinted a mini human heart.

[www.engadget.com/2019/09/09/biolife4d-3d-bioprints-mini-human-heart/?guccounter=1](http://www.engadget.com/2019/09/09/biolife4d-3d-bioprints-mini-human-heart/?guccounter=1)

#### NEW HEARING AID TECHNOLOGY

The truth is that hearing aids have changed dramatically in recent years, reimagined through the digital technology that has transformed so many of the devices of our daily lives. They have not only become more discreet, but also are adding functions far beyond helping us hear better.

One of the biggest advances in hearing aids is their ability to use wireless Bluetooth technology to directly stream audio from other devices. No more annoying, whistling feedback. Instead, live sound from a TV, laptop or tablet is transmitted to a hearing aid through an app downloaded on your smartphone. Usually, it’s an app tied to the specific hearing aid model. Because you control the volume through your phone, you

can turn it up without actually making the TV louder in the room.

When a call comes into your smartphone, the app sends an alert, allowing you to answer simply by pressing a button on your phone. Again, the sound is directly transmitted to the hearing aid. Once the call ends, the audio switches back to the TV or whatever device to which you were listening.

[www.nextavenue.org/new-hearing-aid-apps](http://www.nextavenue.org/new-hearing-aid-apps)

### **Dollars & Sense**

#### **REPORTING FRAUD TIPS**

For problems with mortgages, debt collection, credit and other financial products, file a complaint with the Consumer Financial Protection Bureau ([www.consumerfinance.gov/complaint/](http://www.consumerfinance.gov/complaint/)) The CFPB notes that your complaint helps the agency identify problems for potential action and protect other consumers.

If you find unauthorized charges on your credit card or a caller asks for your Social Security number or other financial information, call AARP's Fraud Watch Network helpline ([www.aarp.org/money/scams-fraud/helpline/](http://www.aarp.org/money/scams-fraud/helpline/)) at 877-

908-3360. The hotline is run by AARP staff and volunteers with extensive training and experience fighting elder fraud. You can also sign up for bi-weekly watchdog alerts or check the scam tracking ([www.aarp.org/money/scams-fraud/tracking](http://www.aarp.org/money/scams-fraud/tracking)) for fraud trends.

If you think your broker made an unauthorized trade or other suspicious move, contact the Financial Industry Regulatory Securities Helpline for Seniors at 844-574-3577. FINRA is a self-regulatory organization governing broker-dealers. You can file a complaint online (<https://www.finra.org/investors/have-problem/file-complaint/complaint-center>).

If you are aware of investment scams or unfair practices, you can also file a tip (<https://www.finra.org/contact-finra/file-tip>).

[www.kiplinger.com/article/](http://www.kiplinger.com/article/)

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[retirement/T048-C000-S004-retirees-how-to-report-fraud-and-scams.html](http://retirement/T048-C000-S004-retirees-how-to-report-fraud-and-scams.html)

### **Laugh & Live Longer**

#### **MY FAVORITE EXERCISE**

My favorite exercise is a cross between a lunge and a crunch. It's called lunch.

#### **IS IT A GOOD BABY?**

A three-year old walks over to a pregnant lady while waiting with his mother in a doctor's surgery.

"Why is your stomach so big?" he asks.

"I'm having a baby," she replies.

"Is the baby in your stomach?" he asks, with his big eyes.

"Yes, it is," she says.

"Is it a good baby?" he asks, with a puzzled look.

"Oh, yes. A really good baby," the lady replies.

Shocked and surprised, he asks: "Then why did you eat him?"

#### **DREAM**

Last night I dreamt of a beautiful walk on a sandy beach. At least that explains the footprints I found in the cat litter box this morning.

#### **QUIZ**

How do you get two whales in a car? Start in England and drive west.

**HALLOWEEN JOKES**

I threw a boomerang at a ghost the other day. I knew it would come back to haunt me.

Why was the skeleton afraid to cross the road? It had no guts...

How do witches keep their hair in place while flying? With scare spray...

**Purposeful Living**

Madelyn Klose, 94, a retired minister was one of the first women to pastor a church in New England. Although she has a very large extended family, Madelyn is constantly giving and thinking of others within the Antrim community, living frugally so that she can give to others.

Until she was 89 years old, Madelyn facilitated a Caregivers Support Group at our Library to help those in the community who had family members with mental health issues, mobility issues, terminal cancer, or dementia.

She also fills in for a local church when the pastor is ill or in desperate need of a vacation. Until recently, she would run from the

pulpit to the piano to accompany the congregation when singing hymns because the pastor's wife was their musician. Many people will attend just to hear Madelyn preach.

Madeline's life is full with the following activities: Leads Strong Living Senior Exercise Program ; to date, has knitted 200 prayer shawls for those who are critically ill or grieving; makes and delivers meals to those in crisis within the community; creates handmade baby quilts for newborns in her community.

Madelyn has been sewing baby quilts for newborns in the community for years. She started this project in her previous community by sewing quilts for babies who were born with AIDS. And, she and a friend had been publicly recognized for creating the most quilts for this project. She bakes for Library Programs & Senior Center Parties several times per year; personally delivers home baked goodies to community librarians and bank tellers during the holidays; and teaches Adult Bible Study during Vacation. She has been teaching Bible School for about 12 years, and is Speaker for Ecumenical Lenten Luncheons.

Madelyn's compassion holds no bounds. She visits with those who are ill and grieving, often creating exquisite hand knit shawls which are created as she prays for the individual. When someone is in trouble due to illness, job loss, personal tragedy or grief, Madelyn is often knocking on that person's door with a basket in hand containing a warm meal. Her generosity is astounding.



Rev. Madelyn Curtis Klose

**Board Notes**

**IT'S THAT TIME AGAIN...**

If you are Medicare eligible, you're probably aware that the annual enrollment period for choosing your Medicare coverage options begins October 15 and runs through December 7. We urge you to begin exploring your options early in this window rather than later as there are several factors for 2020 to consider.

As we pointed out in the September Board Notes there are basic differences

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between traditional Medicare coverage and the new advantage plans. Traditional Medicare, or Part A mandatory and Part B optional is not a comprehensive plan, paying 80% of the allowable fee. So, many people also purchase a supplemental plan. The Advantage plans tend to offer a more comprehensive package. But be discerning—if it looks too good to be true, it probably is.

Unless your TV has been turned off lately you may be unaware of all the ads for the numerous Advantage plans. There’s a lot of carrot dangling about coverage that may include prescription drugs, eye-glasses, hearing aids, and dentures. And they encourage you to see *if you qualify*. As we pointed out, there are additional factors you may want to consider:

Traditional Medicare is available nationwide; Advantage Plans use networks. Further, if you select a plan to keep a specific doctor, know he or she can leave the network at any time while you must wait for annual enrollment.

There is assistance to help you through this maze from online research to navigators associated with various organizations, and of course ServiceLink. CMS (Centers for Medicare and Medicaid Services) offers Communications and Marketing Guidance and a Medicare Path Finder (MPF) tool to assist you with evaluating the various plans. But there are cautions: the sheer number of plans available makes matching a plan to your specific situation more complicated. And there are concerns that recent

changes to these tools created a small learning window for navigators.

Choosing the best plan for you in 2020 is something that requires thoughtfulness, discernment and time to weigh your options.

**Contact Information For NH Members of the U.S. Congress**

Name	Mailing Address	Phone	E-Mail Contact Form
U.S. Rep. Chris Pappas	323 Cannon HOB, Washington, DC 20515	202-225-5456	<a href="https://shea-porter.house.gov/contact/email">https://shea-porter.house.gov/contact/email</a>
U.S. Rep Ann Kuster	137 Cannon House Office Building, Washington, DC 20515	202-225-5206	<a href="https://kuster.house.gov/contact/email-me">https://kuster.house.gov/contact/email-me</a>
U.S. Senator Maggie Hassan	B85 Russell Senate Office Building, Washington, DC 20510	202-224-3324	<a href="https://www.hassan.senate.gov/content/contact-senator">https://www.hassan.senate.gov/content/contact-senator</a>
U.S. Senator Jeanne Shaheen	506 Hart Senate Office Building, Washington, DC 20510	202-224-2841	<a href="http://www.shaheen.senate.gov/contact/contact-jeanne">www.shaheen.senate.gov/contact/contact-jeanne</a>